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# First Aid Policy

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This policy has been adopted by Pathfinder Multi Academy Trust and is applicable across all schools that make up the Trust. In line with the MAT's Scheme of Delegation, this Policy must be duly applied by each Local Governing Committee and the Headteacher of each school in Pathfinder Multi Academy Trust.

Where there are specific details or any discretions in the policy that apply to an individual school or Local Governing Committee this has been made clear within the wording of the policy.

This policy will be reviewed in line with the agreed timetable for policy review or sooner as events or legislation changes require.

Date Adopted: **April 2024**

Date for Review: **April 2025**

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2024-25 changes to this policy:

- Introduction - Added Infection Control Policy and Manual Handling Policy to the list of associated policies.
- Section 1 - Added Social Security (Claims and Payments) Regulations 1979 to the list of legislation and statutory guidance.
- Section 5 - Added sections 5.7 to 5.12 regarding off site emergency procedures.
- Sections 6.8 to 6.15 - Reformatted to mirror the RIDDOR obligations for reporting injuries, diseases or dangerous occurrences to the HSE.

## Introduction

Pathfinder Multi Academy Trust is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting staff, pupils and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by each Pathfinder school in regard to all staff, pupils and visitors.

Pathfinder schools will take every reasonable precaution to ensure the safety and wellbeing of all staff, pupils and visitors. Details of such precautions are noted in the following policies:

- Health and Safety Policy
- Intimate care Policy
- Infection Control Policy
- Behaviour Policy
- Child Protection and Safeguarding Policy
- Lone Worker Policy
- Manual Handling Policy
- Supporting Pupils with Medical Conditions Policy

Each Pathfinder school's lead first aider has overall responsibility for ensuring that the school has adequate and appropriate first aid equipment, facilities and staff and for ensuring that the correct first aid procedures are followed.

## 1 Legal Framework

1.1 This policy has due regard to legislation and statutory guidance, including, but not limited to, the following:

- Health and Safety at Work etc. Act 1974
- The Health and Safety (First Aid) Regulations 1981
- The Management of Health and Safety at Work Regulations 1999
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
- Social Security (Claims and Payments) Regulations 1979
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'First aid in schools, early years and colleges'
- DfE (2013) 'Health and safety: advice for schools'
- DfE (2019) 'Automated external defibrillators (AEDs) in schools'
- DfE (2021) 'Early years foundation stage (EYFS) statutory framework'

## 2 First aid provision

- 2.1 Schools will routinely re-evaluate their first aid arrangements, at least annually, to ensure that these arrangements continue to be appropriate for hazards and risks on the school premises, the size of the school, the needs of any vulnerable individuals onsite, and the nature and distribution of pupils and staff throughout the school.
- 2.2 All staff will read and be aware of this policy, know who to contact in the event of any illness, accident or injury, and ensure that this policy is followed.
- 2.3 Staff will always use their best endeavours to secure the welfare of pupils.
- 2.4 Anyone on the school premises is expected to take reasonable care for their own and other's safety.

2.5 The aims of this policy are to:

- Ensure that the school has adequate, safe and effective first aid provision for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how major or minor.
- Ensure that staff and pupils are aware of the procedures in the event of any illness, accident or injury.
- Ensure that medicines are only administered at the school when express permission has been granted for this.
- Ensure that all medicines are appropriately stored.
- Promote effective infection control.

2.6 Nothing in this policy will affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 in the event of a medical emergency before implementing the terms of this policy and make clear arrangements for liaison with ambulance services on the school site.

2.7 School will have suitably stocked first aid kits in line with the assessment of needs. Where there is no special risk identified, a minimum provision of first aid items will be as follows:

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

No medication is kept in first aid kits.

2.8 The appointed person will routinely examine the contents of first aid boxes, including any mobile first aid boxes for offsite use – these will be frequently checked and restocked as soon as possible after use. Items will be safely discarded after the expiry date has passed.

2.9 First aid notices will be clearly displayed throughout the school with information on the names and locations of first aiders to ensure that pupils and staff know who they must contact in the event of illness or injury.

### **3 First aiders**

3.1 The main duties of first aiders will be to administer immediate first aid to pupils, staff or visitors, and to ensure that an ambulance or other professional medical help is called, when necessary.

3.2 The school will ensure that there is always a sufficient number of first aid personnel available on site at all times to provide adequate cover to all areas of the school.

- 3.3 EYFS only - In line with government guidance, and taking into account staff to child ratios, the school will ensure that there is at least one member of staff with a current and full Paediatric First Aid (PFA) certificate on the premises and available at all times when pupils are present.
- 3.4 The school will ensure that refresher training and retesting of competence is arranged for first aiders within the school before certificates expire.
- 3.5 When selecting first aiders, the school will follow the criteria laid out in government guidance, considering the individual's:
- Reliability and communication skills.
  - Aptitude and ability to absorb new knowledge and learn new skills.
  - Ability to cope with stressful and physically demanding emergency procedures.
  - Normal duties – a first aider must be able to leave to go immediately to an emergency.

## **4 Automated external defibrillators (AEDs)**

- 4.1 Where a school has procured an AED, its location will be clearly sign posted and communicated to all staff.
- 4.2 Where the use of the AED is required, individuals will follow the step-by-step instructions displayed on the device.
- 4.3 A general awareness briefing session, to promote the use of AEDs, will be provided to staff on an annual basis.

## **5 Emergency procedures**

### **In school procedures**

- 5.1 If an accident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.
- 5.2 If called, a first aider will assess the situation and take charge of first aid administration.
- 5.3 If the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they will arrange for the injured person to access appropriate medical treatment without delay.
- 5.4 Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, or the individual(s) has become seriously unwell, a responding staff member will call 999 immediately.
- 5.5 Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, one or more of the following actions will be taken:
- Administer emergency help and first aid to all injured persons. The purpose of this is to keep the victim(s) alive and, if possible, comfortable, before professional medical help can be called. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more victims.

- Call an ambulance or a doctor, if this is appropriate. Moving the victim(s) to medical help is only advisable if the person doing the moving has sufficient knowledge and skill to move the victim(s) without making the injury worse.
- Ensure that no further injury can result from the accident, either by making the scene of the accident safe, or (if they are fit to be moved) by removing injured persons from the scene.
- Responding staff members will see to any pupils who may have witnessed the incident or its aftermath and who may be worried or traumatised, despite not being directly involved. These pupils will be escorted from the scene of the incident and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.

5.6 Once the above action has been taken, the incident will be reported promptly to:

- The Headteacher.
- The victim(s)'s parents.
- If a serious injury requiring hospital treatment has been sustained by a pupil, member of staff or visitor, the Pathfinder Operations Team should also be informed.

### **Off site procedures**

5.7 When taking pupils off the school premises, staff will ensure they always have the following:

- A mobile phone
- A fully stocked portable first aid kit
- Information about the specific medical needs of pupils
- Parents' contact details

5.8 When transporting pupils using a minibus or other large vehicle, the school will make sure the vehicle is equipped with a clearly marked first aid box

5.9 Risk assessments will be completed prior to any educational visit than necessitates taking pupils off school premises.

5.10 The trip organiser must consider if individual pupil risk assessments are required and liaise with the DSL and SENDCo as necessary.

5.11 There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Year Foundation Stage.

5.12 There will always be at least one first aider on school trips and visits where possible.

## **6 Reporting accidents and record keeping**

### **Record keeping**

6.1 An accident form will be completed by the first aider/relevant member of staff on the same day or as soon as possible after an incident resulting in injury.

6.2 The school will ensure that records are kept of any injuries, accidents or illnesses, as well as any first aid treatment that is given.

- 6.3 Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

#### **Notifying parents and carers**

- 6.4 In the event of incident or injury to a pupil, at least one of the pupil's parents will be informed as soon as practicable.
- 6.5 Parents will be informed of any injury to the head, whether minor or major, and be given guidance on the action to take if symptoms develop.
- 6.6 In the event of a serious injury or an incident requiring emergency medical treatment, the school will telephone the pupil's parents as soon as possible.
- 6.7 A list of emergency contacts will be kept on the school's MIS.

#### **Reporting to the HSE**

- 6.8 The Headteacher will ensure that any injury or accident that must be reported to the Health and Safety Executive under RIDDOR obligations is reported as soon as is reasonably practicable and in any event within 10 days of the incident.

#### **School staff: reportable injuries, diseases or dangerous occurrences include**

- 6.9 These include:
- Death
  - Specified injuries, which are:
    - Fractures other than to fingers, thumbs and toes
    - Amputations
    - Any injury likely to lead to permanent loss of sight or reduction in sight
    - Any crush injury to the head or torso causing damage to the brain or internal organs
    - Serious burns (including scalding) which covers more than 10% of the whole body's total surface area; or causes significant damage to the eyes, respiratory system or other vital organs
    - Any scalping requiring hospital treatment
    - Any loss of consciousness caused by head injury or asphyxia
    - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- 6.10 Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the relevant member of staff will report these to the HSE as soon as practicable and in any event within 15 days of the accident.
- 6.11 Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
- Carpal tunnel syndrome
  - Severe cramp of the hand or forearm
  - Occupational dermatitis, e.g. from exposure to strong acids or alkalis, including domestic bleach
  - Hand-arm vibration syndrome
  - Occupational asthma, e.g. from wood dust
  - Tendonitis or tenosynovitis of the hand or forearm



- Any occupational cancer
- Any disease attributed to an occupational exposure to a biological agent

6.12 Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:

- The collapse or failure of load-bearing parts of lifts and lifting equipment
- The accidental release of a biological agent likely to cause severe human illness
- The accidental release or escape of any substance that may cause a serious injury or damage to health
- An electrical short circuit or overload causing a fire or explosion

**Pupils and other people who are not at work (e.g. visitors): reportable injuries, diseases or dangerous occurrences**

6.13 These include:

- Death of a person that arose from, or was in connection with, a work activity\*
- An injury that arose from, or was in connection with, a work activity\* and where the person is taken directly from the scene of the accident to hospital for treatment

\*An accident “arises out of” or is “connected with a work activity” if it was caused by:

- A failure in the way a work activity was organised (e.g. inadequate supervision of a field trip)
- The way equipment or substances were used (e.g. lifts, machinery, experiments etc); and/or
- The condition of the premises (e.g. poorly maintained or slippery floors)

Information on how to make a RIDDOR report is available here: [How to make a RIDDOR report, HSE](#)

**Reporting to Ofsted and child protection agencies (Early Years only)**

6.14 The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school’s care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

6.15 The Headteacher will also notify local child protection agencies, including the local authority, of any serious accident or injury to, or the death of, a pupil while in the school’s care.

## 7 Storage of medication

7.1 Medicines will always be stored securely and appropriately in accordance with individual product instructions, save where individual pupils have been given responsibility for keeping such equipment with them.

7.2 All medicines will be stored in the original container in which they were dispensed, together with the prescriber’s instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine.

7.3 At the end of the academic year all medication will be returned to parents for safe disposal. Any uncollected medication will be disposed of using appropriate channels.

- 7.4 An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, e.g. an EpiPen.
- 7.5 Parents will advise the school when a child has a chronic medical condition or severe allergy so that an IHP can be implemented and staff can be trained to deal with any emergency in an appropriate way. Examples of this include epilepsy, diabetes and anaphylaxis. A disclaimer will be signed by the parents in this regard.

## **8 Illness and Allergies**

- 8.1 When a pupil becomes ill during the school day (e.g. they have been sick or repeatedly complain of feeling unwell), the parents will be contacted and asked to pick their child up as soon as possible.
- 8.2 A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parents to pick them up. Pupils will be monitored during this time.
- 8.3 Where a pupil has an allergy, this will be addressed via their IHP.

## **9 Consent**

- 9.1 Parents will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, details of allergies and chronic conditions, and consent for the administration of emergency first aid.
- 9.2 Staff do not act 'in loco parentis' in making medical decisions as this has no basis in law. Staff will always aim to act and respond to accidents and illnesses based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the pupil in mind.